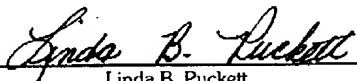


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I hereby certify that this correspondence is being facsimile transmitted to Patent Examiner Wayne A. Langel, Art Unit 1754 at (703) 872-9306 on April 16, 2004.



Linda B. Puckett

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Soon-Jai Khang et al.
Application No.: 09/712,626
Filed: November 14, 2000
Title: METHOD AND APPARATUS FOR TREATING FLUE GAS
Examiner: Wayne A. Langel
Art Unit: 1754
Atty Docket No.: UOC-128D

Cincinnati, Ohio 45202

April 16, 2004

Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

REPLY TRANSMITTAL

1. Transmitted herewith is an amendment for this application.
2. ☒ Small Entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.
☐ Enclosed is a verified statement to establish small entity status.
☐ Other Than a Small Entity.

3. The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)	SMALL ENTITY		LARGE ENTITY	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Addit. Fee	Rate	Addit. Fee
TOTAL	41	MINUS	41	0	x 9	\$0	x18	\$ -0-
INDEP.	3	MINUS	3	0	x43	\$0	x86	\$ -0-
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+145	\$0	+290	\$ -0-
					TOTAL FEE	\$0	TOTAL FEE	\$ -0-

X No additional fee for claims is required.

4. Attached is a check in the sum of \$_____.

_____ Please charge my Deposit Account No. 23-3000 in the amount of \$____. A duplicate copy of this sheet is attached.

5. The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply.

Complete (a) or (b) as applicable.

(a) _____ Applicant petitions for an extension of time under 37 CFR 1.136 for the total number of months checked below:

Extension (months)	Fee for other than small entity	Fee for small entity
_____ one month	\$ 110.00	\$ 55.00
_____ two months	\$ 420.00	\$ 210.00
_____ three months	\$ 950.00	\$ 445.00
_____ four months	\$1,480.00	\$ 740.00
_____ five months	\$2,010.00	\$1,005.00

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

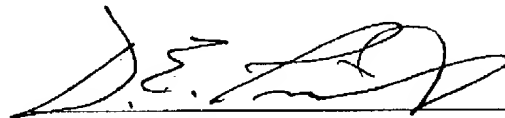
_____ An extension for _____ months has already been secured and the fee paid therefor of _____ is deducted from the total fee due for the total months of extension now requested.

_____ Extension fee due with this request \$ _____.
Please charge Deposit Account 23-3000 in the amount of \$ _____.

OR

- (b) X Applicant believes that no extension of time is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

6. If any additional fee is required, please charge Deposit Acct. No. 23-3000.



David E. Pritchard
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